

12/4/13  
Waterbury State complex Buildings  
Waterbury VT  
ASB. NESAP Inspection  
My cell 617-724 22 37

12:31 - Mike Stevens VT St

Office 802-825-5377

Cell 802-6702 - left msg -

o TMC Services / Environmental

- Joe Dourney 802-863-5800

o NCM Demolition / Remediation

- Michael Delaney 978-657-5445

13:15 enter site

Work Active as of 12/4/13

Forum on site. All NCM: Mike White

5N

4N

Ntp

8/9 N

N connector

123 N

work active (S) all TMC Forman TBD

123  
67  
89  
4

Notif

6/7 S.

Possible  
Discrepancy  
ACM #5

8/9 S.

ACM #5

ASB Survey

S connector CAT A

123 North CAT A

ASB Survey

8/15/67 no rev.

ASB Survey

Center Building start 12/6/13  
rev to come

Dele Building

Status - asb work not started  
start - 1/6/14

8/9 North

Site visits

123 (N)

Waste shipment record requested

8/9 (W)

Waste shipment record requested

123 (S)

Waste shipment record requested

TMC

supervisor

net on site 12/4/13 sub

Carl Heryx

Walkthrough performed  
- no active subs at that time  
- 73 inspected trailer.

Geoff Willey - on site 12/4/13  
- visually met throughout.

out brief

~~Mike~~ Mike Stevens

Chris Crothers

Brian Terhune

Boitun Herrath

Andrew Metayer

Michael White.

no lock

from 123 N<sup>1</sup>

o Caylor Boxes not adequately wet - if ACN or PACM

State ment From Crothers of documenting corrections

Waste Interventions From Crothers - re waste wetted

Final waste manifests - from crothers/sib  
Chris Crothers instructs that waste should not leave site until  
reviewed by him and adequately wetted.

o Notifications

- NCM Mike will send Chris  
notifications.

o Mike

- original + refresher <sup>certificate</sup> for all  
workers on 1/23 (N)



Received onsite from Mike Wite  
12/04/2013

53-13051-A-AO

# SERVICE TRANSPORT GROUP, INC.

17

58 PYLES LANE, NEW CASTLE, DE 19720

PHONE: (877) 999-9559

Nº 317128

## WASTE SHIPMENT RECORD

S.T.G. #

GENERATOR	1. Material Origin Site <i>Waterbury Complex 103 So. Main St. Waterbury, VT 05633</i>		Generator: Name/Address <i>State of Vermont 2 Governor Aiken Ave. Montpelier, VT 05633</i>		Generator: Phone # <i>802-828 5377</i>
	2. NCM Demolition and Remediation, LP 14 Jewel Drive Wilmington, MA 01877				Contractor: Phone # 978-657-5445
	3. Responsible Agency: Name/Address U.S. EPA Region I 5 Post Office Square, Ste. 100 Boston, MA 02109-3912				4. US DOT Class - FRIABLE ASBESTOS ONLY  NA 2212, RQ ASBESTOS, 9, PG III
	5. Description of Materials Specify Friable or Non-Friable				
	IF Friable (enter required information) <input checked="" type="checkbox"/>				Containers No. <i>24 boxes of Plasters</i>
	IF Non-Friable (check one): <input checked="" type="checkbox"/> Category I <input type="checkbox"/> Category II				<i>134 Bundles</i>
	6. Special Handling Instructions 24-hour emergency spill response no. 800-424-9300				
TRANSPORTER	7. Generator Certification: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transport by highway according to the applicable regulations of the Department of Transportation, US E.P.A., and any other state government agency. I certify that the foregoing is true and correct to the best of my knowledge. If the waste shipment is not as I stated, I accept the RETURN of the COMPLETE LOAD to the generator's service location at the generator's expense.				
	Printed/Typed Name & Title <i>WELINGTON SOSA</i>		Signature <i>WELINGTON SOSA</i>		Date <i>12-4-13</i>
	8. Transporter 1 (Acknowledgement of Receipt of Materials) If blank, see Transporter 2 or 3 below.				
	Company Name & Address <i>NCM Demolition Remediation 14 Jewel Drive Wilmington, MA 01877</i>		Signature: _____		Telephone No. <i>978-657-5445</i>
			Printed Name: _____		Date: _____
DISPOSAL SITE	9. Transporter 2 (Acknowledgement of Receipt of Materials)				
	Company Name & Address		Signature: _____		Telephone No.
			Printed Name: _____		Date: _____
10. Transporter 3 (Acknowledgement of Receipt of Materials)					
Company Name & Address Service Transport Group, Inc. 58 Pyles Lane New Castle, DE 19720		Signature: _____		Telephone No. 877-999-9559	
		Printed Name: _____		Date: _____	
11. Discrepancy Indication Space:					
12. Waste Disposal Site Owner or Operator's Certification (Receipt of above Waste except as noted in 11)					
Waste Disposal Site (Check One)		STG USE ONLY		Date:	
Sanitary Landfill <input type="checkbox"/> 901 Tyrol Blvd. Belle Vernon, PA 15012 724-929-7694 Ext. 14 Permit No. 100277		Minerva Landfill <input type="checkbox"/> 8955 Minerva Rd. Waynesburg, OH 44688 330-866-3435 Permit No. P0104984		Signature: _____	
				Printed Name: _____	
				Title: _____	

Alexander Aman

12/3/13

Waterbury, VT 12/4/13 Asbestos NESHAP Inspection

# Appendix A

## Inspection Equipment Checklist

### Inspection Materials and Equipment

Copy of Notification

Site map

Building diagrams

Inspector credentials:

identification

letter of authorization

med. monitoring certification

fit test certification

training certificate

business cards

Copy of regulation (CFR version)

Inspection checklist

Field notebook

Plastic clipboard

Overhead proj. trans. sheets

Waterproof camera

extra battery(ies)

film

Flashlight, lg. waterproof

extra batteries

extra bulb

Flashlight, penlight

extra batteries

extra bulb

Binoculars

Measuring device (tape,  
electronic)

Chain of custody forms

Custody tape/labels

Shipping supplies

Resealable plas. bags, qt./gal.

Office supplies

large envelopes

folders

pens/pencils

highlighting marker

plain paper

spiral-bound notebook

yellow stickies

large paper clips

binder clips (lg., sm.)

indelible markers

fine

medium

large

Waterproof watch

Compass

Asbestos warning signs/tape

Miscellaneous materials/tools

crowbar

web strap and snatch

locking ammo box

knife sharpener

equipment containers

dufflebag

rolling carry-on

tackle box

5-gal. bucket

extendible mirror

utility knife

diver's bag

"Please return film to:" sheet



## Personal Protective Equipment

### Respiratory Protection

#### Respirators:

Full-face NPR  
Cartridges:  
P100  
Ammonia/P100  
Org. vapor/P100  
Org. vapor/acid/P100  
PAPR (tight-fitting)  
Cartridges  
Backup battery  
SCBA

#### Miscellaneous:

Spectacle kit  
Disinfectant (pads, powder)  
Dust masks

### Body Protection

Coveralls  
Tyvek  
breathable

Gloves  
disposable  
work

#### Footwear

steel-toed/shank boots or  
safety shoes  
latex overboots

#### Head protection

hardhat  
hearing protection  
safety glasses (clear/tinted)  
hat/cap

#### Survival/medical gear

med. ID bracelet/necklace  
first aid kit  
snakebite kit  
potable water  
water bottle  
food  
sunscreen/long-sleeved shirt  
foul weather clothing  
Pocket Guide to Chem. Haz.

#### Shower supplies

shower thongs  
comb  
shampoo  
liquid soap  
towels, disposable  
bathing suit/equivalent

#### Miscellaneous

duct tape  
safety harness/lanyard  
inspection itinerary  
plastic belt  
cooler

### Sampling Equipment

#### Sample containers

Spray bottle

#### Tools:

needle-nose pliers  
locking blade knife (2)  
screwdrivers (slotted, Phil.)  
laboratory spatula  
coring tool  
metal forceps  
spoon

Plastic dropcloth

Wet wipes

Glove bags

Bathroom caulking

Labeled waste disposal bag

Brown paper towels

# Appendix B

## Asbestos Demolition and Renovation Field Data Collection Checklist

### A. GENERAL INFORMATION

Site name: Waterbury State Complex

Address: 103 Main St, Waterbury VT

Site code:        Date of inspection: 12/4/13

Inspection time in: 12:45 pm Inspection time out: 3:45 pm

Weather conditions: 36°F partly cloudy

Inspector(s): Alexander Aman - EPA

Reason for inspection:

Routine compliance ☒ Citizen complaint ☐ Suspected non-notifier ☐

Other (explain): ✓ concerns from VT DPH

Notification received? ☒ (date): multiple No: ☐

Start/completion dates: multiple - see binder of notification

Notification:       

Actual:       

Facility description: multiple buildings - see site plan

Number of floors:        Dimensions:        Age (if known):       

Type of construction: brick

Present use: vacant

Prior use: multiple - hospital, office complex

Appendix B

Project status:

	Yes	No
Contractor onsite?	<u>X</u>	<u>      </u>
Work in progress?	<u>X</u>	<u>      </u>
Project complete?	<u>      </u>	<u>X</u>

**B. REMOTE OBSERVATIONS**

1. If necessary, draw a sketch of the suspected abatement area. Draw the building or other source of suspect ACM, waste storage area(s), location(s) of debris, land use surrounding site, vehicles of importance, visible emissions, etc. Estimate and indicate dimensions and distances as accurately as possible on the drawing. Note wind direction, site orientation, and locations of photographs/samples.

**REMOTE OBSERVATION SKETCH**

*See attached Site Plan*

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



	Yes	No
2. Is an ACWM transport vehicle present?	<u>X</u>	<u>      </u>
If "yes", is it being loaded?	<u>      </u>	<u>X</u>
If "yes", is it properly marked during loading?	<u>      </u>	<u>      </u>

**C. PRE-INSPECTION PROCEDURES**

**1. Entry:**

Agency identification shown?	<u>Yes</u>	<u>      </u>
Authorization and reason for inspection explained?	<u>Yes</u>	<u>      </u>
Medical monitoring/fit-test certification shown?	<u>NA</u>	<u>      </u>
Entry gained?	<u>Yes</u>	<u>      </u>

Entry authorized by: Brian Terhune, VT Dept of Buildings and Gen. Works

Comments:       

**2. Opening conference participants (name, title, company, onsite responsibility):**

Brian Terhune, VT Dept of Buildings and Gen. Works

Zoltan Horvath, Zoltan Horvath, LLC, Consultant

Andrew Metayer, VT Dept of Buildings and Gen. Works

Mike Stevens, VT Dept of Buildings and Gen. Works

Chris Crothers, Crothers Environmental Group, LLC

**3. Name, address, contact name, telephone number, onsite responsibility and accreditation number for any entity not noted above (or in the notification) which controls or supervises the demolition/renovation project:**

Appendix B

Business card attachment site:

4. Describe any changes/modifications/discrepancies to the information provided in the notification:

Work ongoing per start dates.

Multiple modifications from original notif to re-eval. Discussed in  
in brief. C.C. will follow up with TMC + NCM and provide  
info to EPA including Ash surveys of S. 6/7, S. 8/9, & 1/2/3

5. Onsite representative

- a. Name/title/company of onsite representative who has had required NESHAP training:

\_\_\_\_\_

- b. Is evidence regarding such training:

Yes

No

posted?

\_\_\_\_\_

\_\_\_\_\_

available for inspection?

\_\_\_\_\_

\_\_\_\_\_

Comments:

\_\_\_\_\_

\_\_\_\_\_

6. Is the project subject to the MAP? (Complete MAP compliance chart if necessary.)

Yes

No

If "yes",

initial certifications onsite?

current certifications onsite?

Comments:

NA

7. Site activity (if more than one project is occurring at the facility, complete a separate checklist for each or differentiate accordingly)

Planned renovation

Emergency renovation\*

Demolition

Ordered demolition\*\*

Nonscheduled operation

\*If the activity is an emergency renovation, does notification contain:

Yes

No

date/hour emergency occurred?

description of emergency?

explanation re: unsafe condition/equipment damage/financial burden?

\*\*If the activity is an ordered demolition, was order submitted with notification?

If yes, does order list:

name, title, authority of government representative?

date demolition was ordered to begin?



8. Was the facility inspected?

Yes

No

?

☒

If "yes", is a copy of the building inspection at the site?

☒

If "yes":

Building inspector name:

not reviewed during inspection. Requested copies

Company:

Accreditation/State license number(s):

9. Describe the current phase of the project:

Multiple phases ongoing simultaneously: site preparation, active removal, cleanup verification, waste loadout.

**D. SITE INSPECTION**

Yes

No

1. Is the site a "facility"?

☒

2. Quantification of suspect RACM observed:

no RACM observed outside containment or waste storage area. Total  
Inspector did not go in containment due to time constraints**Insulation:**Felt\_\_\_\_ Air cell ☒ Premolded\_\_\_\_ Asbestos cement\_\_\_\_  
Block insulation\_\_\_\_**Surfacing Materials**Plaster ☒ Spackling compound\_\_\_\_ Stucco\_\_\_\_ Joint compound\_\_\_\_  
Sprayed-on (acoustic, decorative insulative)\_\_\_\_**Miscellaneous**

Ceiling tiles\_\_\_\_ Acoustical tiles\_\_\_\_

**Asbestos Demolition and Renovation Field Data Collection Checklist**

**Category I Nonfriable ACM**

**Total**

Floor coverings (VAT, asphalt/asbestos tile, linoleum) Mastic \_\_\_\_\_  
 Packings \_\_\_\_\_ Gaskets \_\_\_\_\_ Asphalt roofing products \_\_\_\_\_

**Category II Nonfriable ACM**

Lab benchtops \_\_\_\_\_ Transite siding \_\_\_\_\_ Vinyl wallpaper \_\_\_\_\_ Putties \_\_\_\_\_  
 Pegboard \_\_\_\_\_ Sealants \_\_\_\_\_ Adhesives X \_\_\_\_\_ Paints/coatings X \_\_\_\_\_  
 Extrusion panels \_\_\_\_\_ Clapboards/shingles \_\_\_\_\_ Millboard \_\_\_\_\_  
 Concrete/asbestos board or siding (transite) \_\_\_\_\_ Concrete/asbestos pipe \_\_\_\_\_  
 Textiles (fire blankets, lab aprons, theater/welding curtains, gloves) \_\_\_\_\_

Other (specify): \_\_\_\_\_

Description/amount of ACM off facility components (components no longer present): \_\_\_\_\_

**Quantification summary:**

Pipes See NFI Placations  
 Other facility components See NFI Placations  
 Off facility components See NFI Placations

3. Method of measuring amounts of suspect ACM (e.g., visual estimation, pacing, tape measure or other device): \_\_\_\_\_

- |  | Yes      | No    |                              |
|--|----------|-------|------------------------------|
| 4. Are regulated amounts of suspect ACM being handled?                       | <u>X</u> | _____ | - Verbal from Chris Crothers |
| 5. Is the material friable?  | <u>X</u> | _____ | - Verbal from Chris Crothers |
| 6. Is the material likely to become friable during demolition or renovation? | <u>X</u> | _____ | - Verbal from Chris Crothers |

Comments: NCAH Plaster removal in N RB, and power saw on plaster

7. How was friability determined? hand pressure in waste container (garbage) boxes.

EPA

**E. DEMOLITION**

	Yes	No
1. Facility ordered demolished? (removal not required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is demolition in progress?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
If "yes": Portion of facility containing RACM adequately wet during wrecking?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Visible emissions during wrecking?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2. Cat. I nonfriable not in poor condition & not friable? (removal not required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. ACM encased in concrete? (removal not required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "yes": Demolition in progress?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
If "yes": Adequately wetted whenever exposed during demolition?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4. ACM not discovered until after demolition began and cannot be safely removed? (removal not required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "yes": Exposed RACM and contaminated debris maintained adequately wet at all times?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5. Category II nonfriable ACM with low probability of becoming crumbled, pulverized or reduced to a powder during demolition? (removal not required)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Facility being demolished by intentional burning?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "yes": Demolition in progress?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
all ACM (including Cat. I and II) removed before burning?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
7. Is ACWM being generated during an ordered demolition or demolition where ACM is not required to be removed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "yes": ACWM kept adequately wet after demolition?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
ACWM kept wet during handling/loading for transport to disposal site? (leak-tight containers or wrapping not required - may be transported and disposed of in bulk)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>



# Asbestos Demolition and Renovation Field Data Collection Checklist

## F. RENOVATION

Yes No NA

### 1. Unit/section removal?

If "yes":

Renovation in progress?

If "yes":

Adequately wet whenever exposed?

Lowered to floor and ground level?

After removal from facility, RACM will be:

stripped

wrapped leak-tight

Stripping of RACM from removed units or sections in progress?

If yes,

Adequately wet?

LEV & collection system in use?

### 2. Are large facility components being removed without the RACM being stripped?

If "yes":

RACM being disturbed or damaged during removal, transport, storage, disposal, reuse?

component encased in leak-tight wrapping?

labeled during loading, unloading, storage?

### 3. Stripping in place?

If "yes":

Stripping work in progress?

If "yes":

Adequately wet while being stripped?

Kept wet until collected and contained or treated in preparation for disposal?

Carefully lowered to floor or ground?

### 4. Is ACM being removed or stripped >50 feet above ground and not being removed as units or sections?

If "yes":

Transported to ground via leak-tight chutes or containers?

Inspector did not go into containment due to time constraints.

Appendix B

	Yes	No	
5. Are glovebags in use?	<u>✓</u>		<i>Inspector did not see but was verbal Chris Crothers</i>
If "yes":			
Seamless on bottom?			
2 individuals conducting work?			
Proper size glovebags?			
Appropriately shaped glovebags?			
Reduced pressure technique in use?			
6. Is Category I nonfriable ACM being sanded, ground, cut, or abraded?	<u>X</u>		<i>Plaster mustle being cut with power saws, verbal C.C.</i>
If "yes":			
ACM adequately wet?	<i>verbal C.C.</i>	<u>X</u>	
LEV and collection system in use?	<u>X</u>		
7. Any visible emissions to the outside air during renovation?		<u>X</u>	<i>Evidence in waste trailer that not adequate material in waste trailer Not wet, holes in wrapping</i>
Comments: _____			

H. EVALUATION OF WETTING

- Is wetting required during activities observed?  
If "no", check off or describe reason below:  
 RACM not being disturbed \_\_\_\_\_  
 wetting exemption \_\_\_\_\_  
 freezing temperatures \_\_\_\_\_  
 other \_\_\_\_\_
- Has owner/operator been granted wetting exemption?  
If "yes":  
 Copy of written approval at worksite? \_\_\_\_\_  
 One of the following in use?  
 LEV and collection system \_\_\_\_\_  
 glove-bag system \_\_\_\_\_  
 leak-tight wrapping \_\_\_\_\_  
 equivalent approved method \_\_\_\_\_  
 copy of written approval for equivalent method at site? \_\_\_\_\_

Yes \_\_\_\_\_ *Chris Crothers no exemptions*

X \_\_\_\_\_

# Asbestos Demolition and Renovation Field Data Collection Checklist

Who granted exemption? na

3. Is the temperature at point of wetting below 32°F?

If "yes":

Facility components removed as units or sections?

Area temperature recorded beginning, middle, end of each workday?

Records available at site? (required)

Records retained 2 years?

Yes

No

☒

4. Is removed ACM awaiting containerization present?

If "yes":

Material adequately wetted?

If "no", adequately wet the material and describe how it changes upon wetting (e.g., color, texture, weight, etc.):

— did not observe material outside waste load out

5. Is containerized RACM present?

If "yes":

Adequately wetted?

Open or ripped containers?

If "yes":

How many? Multiple - waiting on WSM

Contents of containers adequately wet?

If "no", adequately wet the material and describe how it changes upon wetting (e.g., color, texture, weight, etc.):

☒

☒

☒

☒

☒

— Visual — see pics

— Visual — see pics

NCM  
Trailer

• CAT II Plywood + mastic not adequately wet. no condensation in

Clear Plastic wrapping. Minor tears/holes.

• All had Labels

• Plaster and flooring in Gaylor boxes

— Identified as Friable + RACM by Mike White + Chris Crothers

— no condensation on plastic in bags

— dry Powder, dust and Sawdust in bags

— Plaster on boards visually not wet — dry dust on surface of Plaster

— EPA Pored water on plaster, visual change

— No

— Plaster was crushed and reduced to Powder by insp hand procedure.

R2.0-489

B-11

TMC  
Trailer

• Bagged + labled

• Bags not opened but heavy and wet when handled.

• no holes in bags observed

• no lock on trailer — suggested than TMC Secure Trailer



**H. WASTE DISPOSAL (61.150)**

1. Check which of the following waste disposal options has been selected:

Discharge no visible emissions X  
 Adequately wet ACWM         
 Process ACWM into nonfriable form         
 Use Administrator-approved alternative  
 emission control/waste treatment method\*       

\*is approval available for review?  
 (need not be onsite)

Yes No

2. Will ACWM be transported off the facility site?

If "yes":

Generator label on containers?

If "yes", does label contain:

name of waste generator?

location where waste generated?

3. Is all ACWM (excluding Category I nonfriable in good condition) disposed of properly as soon as practical?

4. Is there a waste disposal operation in progress?

If "yes":

Visible emissions to the outside air?

**1. WASTE SHIPMENT RECORDS (WSRs)**

1. Has ACWM been shipped from the site?

If "yes":

Completed WSRs available for review onsite?

If "yes", describe any deficiencies seen:

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---

---

---

---

---

**Asbestos Demolition and Renovation Field Data Collection Checklist**

	Yes	No	?
Has it been >35 days since waste shipped from facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "yes": Signed copy of the WSR received by generator from waste disposal facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "no": Has generator determined status of ACWM?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "no": Has it been 45 days since shipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "yes": Has generator notified EPA in writing that signed copy of WSR not received from disposal facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are copies of all WSRs (including the signed copy sent by the disposal facility) maintained for 2 years?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>J. CLOSING CONFERENCE</b>			
1. Was a closing conference held?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "yes", list names of attendees:			
Mike Stevens	Andrew Metayer		
Chris Crothers	Michael White		
Brian Terhune			
Zoltan Horvath			
2. Summary of recommendations/discussion:	<p><u>Discussed waste material observed to be <del>dry</del> not adequately wet. Discussed past VT DDH inspections of Dry removal. Dry waste indicates continued dry removal. Must ensure that all waste is <del>dry</del> adequately wet until packaged in leak tight containers. Crothers instructed NCM <sup>-Mike White</sup> that no waste should leave the site until he has inspected it and ensured that it is adequately wet. Crothers may bring additional project monitors onsite.</u></p> <p><u>Reviewed list of requested documents. (See inspection <del>not</del> Log)</u></p>		

Appendix B

K. ADDITIONAL COMMENTS

L. ATTACHMENTS

Sample Collection Log

—

Photo Log Sheet

✓

Field Notes

✓

Chain of Custody Form

—

Generator Label

—

Waste Shipment Record

✓

Notification

✓

Photographs

×

ASHARA (MAP) Checklist

—

AHERA Checklist

—

WPR Checklist

—

Others:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Alfreds Alvarado*  
Inspector signature

12/5/13

Date





Agency of  
Administration

**Andrew Metayer**  
Clerk of the Works

Buildings & General Services

[phone] 802-793-8613

[pager] 802-250-3098

Andrew.Metayer@state.vt.us



## Zoltan Horvath, LLC Construction Consultant

Owner Representative

Clerk of the Works

Management Services

Permitting

Plan Review

Estimating

Inspections

Expert Witness

Billing Review

Scheduling



**Crothers**  
Environmental Group, LLC

**R. Chris Crothers**

802-888-1936

29 Duncan Road - Morrisville, VT

[www.crothersenvironmental.com](http://www.crothersenvironmental.com)

[chris@crothersenvironmental.com](mailto:chris@crothersenvironmental.com)

MA License #168429

**Michael White**

Operations Manager

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Agency of  
Administration

**Brian Terhune, Buildings Engineer**

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**Department of Buildings & General Services**

**Facilities Operations - Eastern Region**

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